



** New information for the quarterly report appears in the purple, bold, italic font*

Project Leader(s) & Business Affiliations:

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Organization Legally & Financially Responsible:

Western New York Rural Area Health Education Center, Inc.

Brief Description how coordinated through state or region:

R-AHEC staff having been actively working to coordinate our Rural Pilot efforts with that of others in several different ways:

- 1) We have had three regional meetings of the Project Technical Working Group (TWG) comprising of CIO's and Network Directors of the partnering healthcare organizations.
- 2) We have had numerous meetings with the two Regional Health Information Organizations (RHIO) operating within our shared catchment area.
- 3) We have had two meetings with the Office of the Deputy Commissioner, NYS DOH Office of Information Technology Transformation, along with the two other RHCPP awardees in New York State. The focus is to ensure interoperability and interconnectivity between the three RHCPP projects in New York State.

July, 2009 ~ Quarterly Report

R-AHEC staff has been actively working to coordinate our Rural Pilot efforts with that of others in several different ways:

- 1) We have submitted the draft version of our proposed RFP for review by our coach.
- 2) We are in discussions with the two other RHCPP projects in NY State and with the NY State eHealth Collaborative about the sustainability plan for our project within the context of NY State's plans for a Broadband Health
- 3) We have conducted multiple information sessions with the carrier organizations in our region to provide them information about the FCC Rural Healthcare Broadband Project and to learn about their facilities, technologies and capabilities for offering rural broadband services care Network

October, 2009 ~ Quarterly Report

R-AHEC has been actively working to coordinate our Rural Pilot efforts with that of others in several different ways:

- 1) We are currently working with our coach for the finalization our proposed RFP and supporting documentation.
- 2) We have continued in discussions with the other two RHCPP projects in NY and with the NYState eHealth Collaborative. The Office of HIT at the NY State Department of Health is actively following the development of our RHCPP project.

R-AHEC has been actively working to coordinate our Rural Pilot efforts with that of others in several different ways:

- 1) Finalization our proposed RFP and supporting documentation, posted on USAC website 07/02/09.
- 2) Vendor responses were received on 08/17/09.
- 3) Bid Review committee was established for review of vendor responses and selection of vendor.
- 4) We have continued in discussions with the other two RHCPP projects in NY and with the NYState eHealth Collaborative. The Office of HIT at the NY State Department of Health is actively following the development of our RHCPP project.

January, 2010 ~ Quarterly Report

R-AHEC has been actively working to coordinate our Rural Pilot efforts with that of others in several different ways:

- 1) Finalized our proposed RFP and supporting documentation, posted on USAC website 07/02/09.
- 2) Vendor responses were received on 08/17/09.
- 3) Bid Review committee was established for review and selection of vendor responses and continues to move forward in this process.
- 4) We have continued in discussions with the other two RHCPP projects in NY and with the NYState eHealth Collaborative. The Office of HIT at the NY State Department of Health is actively following the development of our RHCPP project.

April, 2010 ~ Quarterly Report

R-AHEC has been actively working to coordinate our Rural Pilot efforts with that of others in several different ways:

- 1) Finalized our proposed RFP and supporting documentation, posted on USAC website 07/02/09.
 - 2) Vendor responses were received on 08/17/09.
 - 3) August, 2009 - February, 2010 A Bid Review committee reviewed all proposals received, held various meetings, and selected a vendor.
 - 4) A letter of intent was delivered to the vendor and we are currently in contract negotiations
 - 5) We have continued in discussions with the other two RHCPP projects in NY and with the NYState eHealth Collaborative.
- The Office of HIT at the NY State Department of Health is actively following the development of our RHCPP project.

July, 2010 ~ Quarterly Report

R-AHEC has been actively working to coordinate our Pilot efforts with that of others in several different ways:

- 1) Paperwork for FCL is being finalized.
- 2) Preparing for issuing RFP 02 & 03 in early August, 2010
- 3) Continued discussions with other RHCPP projects and the NY State eHealth Collaborative.

October, 2010 ~ Quarterly Report

R-AHEC has been actively working to coordinate our Pilot efforts with that of others in several different ways:

- 1) Funding Commitment Letter was issued in early September, 2010
- 2) Letter of Intent to commence work was sent within days of FCL issuance.
- 3) Prep work and document details for RFP 02 & 03 to be posted on USAC website for additional facilities.
- 4) Continued discussions with other RHCPP project, NY State eHealth Collaborative, and RHIOs.

January, 2011 ~ Quarterly Report

R-AHEC has been actively working to coordinate our Pilot efforts with that of others in several different ways:

- 1) Funding Commitment Letter – RFP 01 was issued in early September, 2010**
- 2) Letter of Intent to commence work was sent within days of FCL issuance.**
- 3) Several facilities were “live” in the January – April time frame.**
- 4) RFP 02 was posted on the USAC website in mid December, 2010 for additional facilities, responses for RFP 02 were due on January 20, 2011 and were promptly reviewed by the Bid Review Committee.**
- 5) A vendor has been selected and we are currently in the process of filing paperwork for an FCL issuance on RFP 02.**
- 6) Continued discussions with other RHCPP project, NY State eHealth Collaborative, and RHIOs.**

NETWORK NARRATIVE

A) Brief Description of backbone network of dedicated health care network (e.g. MPLS Network, carrier-provided VPN, a SONET ring

The Western New York Rural Healthcare Broadband Network (WNY RHBN) is a dedicated Internet Protocol (IP)-based broadband healthcare network that will provide each partner facility a minimum of 10 Megabits per second (Mbps) minimum scalable upwards bandwidth, based upon facility, connecting them over a secure enterprise wide-area-network, with Quality of Service (QoS) features and the option of connecting to the commercial Internet & to Internet 2. When fully implemented, the WNY RBHN will bring services to rural communities through innovative health information technology applications, including telemedicine, imaging, and electronic medical records.

B) Explanation of how health care provider sites will connect to (or access) the network, including access technologies/services and transmission speeds

Each partner facility a minimum of 10 Megabits per second (Mbps) minimum scalable upwards bandwidth, based upon facility, connecting them over a secure enterprise wide-area-network, with Quality of Service (QoS) features and the option of connecting to the commercial Internet & to Internet 2.

C) Explanation of how and where network will connect to a national backbone such as NLR or Internet2

It is proposed that the Western New York Rural Healthcare Broadband Network (WNY RHBN) - a dedicated Internet Protocol (IP)-based broadband healthcare network - will have connectivity to Internet 2 through the nearest NYSERNET point of presence (POP) - NYSERNET is the agency that is responsible for Internet2 connectivity in New York State.

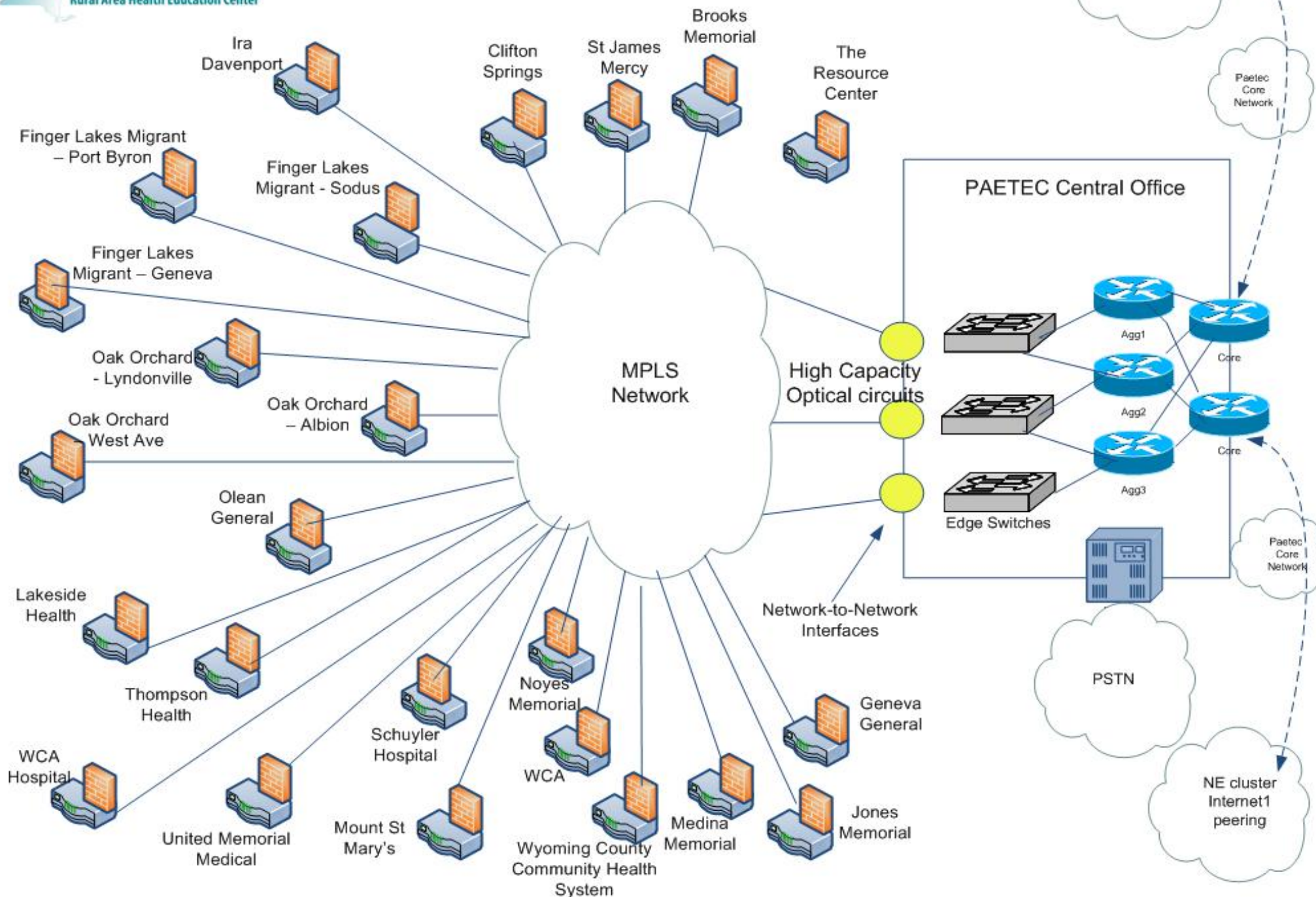
D) Number of miles of fiber construction, and whether the fiber is buried or aerial

The network that our facilities are on is leased network provided by PAETEC. The fiber for these facilities can either be buried or aerial depending upon the location of the facility.

E) Special systems or services for network management or maintenance (if applicable) and where such systems reside or are based.

Our facilities are monitored 24x7 by the Network Operations Center (NOC) with monitoring locations in Rochester, NY and Charlotte, NC.

RFP 01 – Network Diagram



Explanation of Costs:

A) Explanation of Costs identified, allocated, and apportioned to both eligible and ineligible network participants.

The costs that we are identifying are eligible expenses that were incurred in the RFP Design and Development phase of the project. Within this category the key areas of focus have been developing the engineering and design criteria for the RFP and coordinating carrier information sessions with carrier organizations in our region to learn about their technologies, facilities and capabilities to design and implement rural broadband networks.

B) Describe source of funds from:

i) Eligible Pilot Program Network Participants.

In order to address the subsidy, FCC will provide 80% and the remaining 20% of recurring and nonrecurring charges will be paid by the eligible WNY RBHN participants.

ii) Ineligible Pilot Program network participants.

R-AHEC does not own the network. Appropriate, yet ineligible entities, which wish to join the WNY RBHN, will pay for their own installation and service charges for broadband directly to our chosen vendor. R-AHEC and the WNY RBHN will not pay for any services to any ineligible facilities. To date there are no ineligible facilities on the network.

C) Show contributions from all other sources (e.g. local, state, and federal sources, and other grants)

i) Identify sources of financial support and anticipated revenues that is paying for costs not covered by the fund and by Pilot Program Participants

Western New York Rural AHEC is pursuing other Federal and NY State grant funding opportunities to procure equipment and services ineligible to the FCC Pilot Program funding. In addition each of the partners of the WNY RBHN agreed to contribute via sliding scale fee to defray some of the administration of the program (\$5,000 rural, \$10,000 urban, \$25,000 academic).

ii) Identify the respective amounts and remaining time for such assistance.

At this time we are still trying to identify where the respective amounts and time frames for the assistance will be coming from as we are still in the design and development phase of the project. (Please see Section C, subsection i)

D) Explain how selected participants ~~15%~~(for all purposes of our project the facilities are paying 20%) contribution is helping to achieve both the selected participant's identified goals and objectives and the overarching goals of the Pilot Program.

We are just connecting facilities live now and are expecting to start billing within the next few weeks. However, all Pilot Program Participants are in agreement that they will contribute twenty percent of the bandwidth and broadband services provisioned for their respective facilities.

Ineligible Entity Requirements

A) Identify any technical or non-technical requirements or procedures necessary for ineligible entities to connect to the participant's network.

- 1) Confirm the ineligibility of the entity with FCC/USAC
- 2) Convey the ineligibility to the entity
- 3) Identify the entity's requirement for the broadband services over the WNY RBHN and ensure that the requirements are for acceptable healthcare applications
- 4) Identify and convey the costs of broadband access to the entity
- 5) Sign the Memorandum of Understanding with the entity
- 6) Proceed with broadband service provisioning

MANAGEMENT PLAN & SCHEDULE

Management Team:

Kenneth Oakley (Project Coordinator): Phone: 585-344-1022 Email: koakley@r-ahec.org

Kimberly Cummins (APC/Project Administrative Coordinator): Phone: 585-519-2511

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First Quarterly Report ~ July 30, 2008

Projected Schedule*:

Mid to Late October 2008 - Complete Draft RFP and submit for review

Mid November 2008 - Submission of 465 & RFP

January 2009 thru February 2009 - Competitive Bidding Process

March 2009 - Review and selection of vendor(s) for project.

March-April 2009 - Submission of 466-A & Supporting information, Certification by vendor(s)

May 2009 - Funding Commitment Letters

June 2009 - Submission of 467 & Supporting information

July 2009 - Begin project build out.

Second Quarterly Report ~ October 30, 2008

Projected Schedule*:

Late October 2008 thru Early November 2008 - Complete Draft RFP and submit for review

Late November 2008 thru mid December 2008 - Submission of 465 & RFP

Late December 2008 thru late January 2009 - Competitive Bidding Process
February 2009 thru mid March 2009- Review and selection of vendor(s) for project.
Late March thru mid April 2009 - Submission of 466-A & Supporting information, Certification by vendor(s)
Late April 2009 thru early May 2009 - Funding Commitment Letters issued
Late May 2009 thru early June 2009 - Submission of 467 & Supporting information
Mid June 2009- Begin project build out.

Third Quarterly Report ~ January 30, 2009

Projected Schedule*:

End of December 2008 thru early January 2009 - Complete Draft RFP and submit for review (submitted for review)
Mid January 2009- Submission of 465 & 465 attachment (Completed)
Late January 2009 thru Early February 2008 - RFP posted on web & competitive bidding process
Late February 2009 thru Mid March 2009- Review and selection of vendor(s) for project.
Late March 2009 - Submission of 466-A & Supporting information, Certification by vendor(s)
Early April 2009 thru Mid April 2009 - Funding Commitment Letters issued
Late April 2009 thru early May 2009 - Submission of 467 & Supporting information
Mid May 2009- Begin project build out.

Fourth Quarterly Report ~ March 30, 2009

Projected Schedule*:

Late April 2009 thru Early May 2009 - Final approval on RFP submission and supporting documentation
Late May 2009 thru Early June 2009 - 45 day waiting period
Mid June 2009 - Selection of a vendor(s) for the project
Mid June 2009 - Submission of 466-A & Supporting information, Certification by vendor(s)
Late June 2009 - Funding Commitment Letters issued
Late June 2009 thru Early July 2009 - Submission of 467 & Supporting Information
Mid July - Begin project build out.

Fifth Quarterly Report ~ July 30, 2009

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting
Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answering questions from vendors
Mid August, 2009 thru Early September, 2009- review of submitted documents & selection of vendor(s)
Early September, 2009 thru Mid September, 2009 - Submission of 466-A & Supporting Info, Certification of Vendor(s)

Late September, 2009 - Funding Commitment Letter issued

Late September, 2009 thru Early October, 2009 - Submission of 467 & Supporting documentation in addition to the starting of project build out.

Sixth Quarterly Report ~ October 30, 2009

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting

Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors

Mid August, 2009 thru End October, 2009- review of submitted documents & selection of vendor(s)

Early November, 2009 thru Mid November, 2009 - Submission of 466-A & Supporting Info, Certification of Vendor(s)

Late November, 2009 - Funding Commitment Letter issued

Late November, 2009 thru Early December, 2009 - Submission of 467 & Supporting documentation in addition to the starting of project build out.

* Timeline provided is based on best case scenario developed by the Project TWG and is subject to change based on any unforeseen circumstances

Seventh Quarterly Report ~ January 29, 2010

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting

Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors

Mid August, 2009 thru End January, 2010 - review of submitted documents & selection of vendor(s)

Early to Mid February, 2009 thru Mid November, 2009 - Submission of 466-A & Supporting Info, Certification of Vendor(s)

Late February 2010 thru Early March 2010- Funding Commitment Letter issued

March 2010- Submission of 467 & Supporting documentation in addition to the starting of project builds out.

Eighth Quarterly Report ~ April 29, 2010

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting

Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors

Mid August, 2009 thru End January, 2010 - review of submitted documents & selection of vendor(s)

Early to Mid February, 2010 - final selection of a vendor

March, 2010 - April, 2010 - contract negotiations

Early May 2010 - Submission of 466-A, contract & Supporting Info, Certification of Vendor

Mid to Late May 2010- Funding Commitment Letter issued

June 2010- Submission of 467 & Supporting documentation in addition to the starting of project build out.

August/September 2010 - Build out

Ninth Quarterly Report ~ July, 2010

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting
Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors
Mid August, 2009 thru End January, 2010 - review of submitted documents & selection of vendor(s)
Early to Mid February, 2010 - final selection of a vendor
March, 2010 - April, 2010 - contract negotiations
Early May 2010 through early August 2010- Submission of 466-A, contract & Supporting Info, Certification of Vendor
Early August- Funding Commitment Letter issued; as well as RFP #02 & #03 posted on USAC website
Mid August- Submission of 467 & Supporting documentation in addition to the starting of project build out.
Late August/September 2010 - Build out

Tenth Quarterly Report – October, 2010

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting
Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors
Mid August, 2009 thru End January, 2010 - review of submitted documents & selection of vendor(s)
Early to Mid February, 2010 - final selection of a vendor
March, 2010 - April, 2010 - contract negotiations
Early May 2010 through early August 2010- Submission of 466-A, contract & Supporting Info, Certification of Vendor
Early September, 2010- Funding Commitment Letter issued
Mid September – PAETEC commences work on facility build outs
Late October, 2010 – first facilities begin to roll out live.
November, 2010 – Facilities continue to become live. As well as RFP #02 & #03 posted on USAC website
December, 2010 through January 2010 – applications commence

11th Quarterly Report – January, 2011

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting
Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors
Mid August, 2009 thru End January, 2010 - review of submitted documents & selection of vendor(s)
Early to Mid February, 2010 - final selection of a vendor

March, 2010 - April, 2010 - contract negotiations
Early May 2010 through early August 2010- Submission of 466-A, contract & Supporting Info, Certification of Vendor
Early September, 2010- Funding Commitment Letter issued
Mid September, 2010 through mid February, 2011 – PAETEC commences work on facility build outs
Late November, 2010 – first facilities begin to roll out live.
December, 2010 – Facilities continue to become live. As well as RFP #02 posted on USAC website
December, 2010 through January 2011 – F.A.Q on RFP 02, continue building out of facilities, commence invoicing
Late January 2011 – end February, 2011 – Selection of vendor for RFP 02
Mid March, 2011 – RFP 03 for additional facilities if monies allow

12th Quarterly Report – April, 2011

Early July, 2009 - final approval of RFP and supporting documentation, submission & posting
Mid July, 2009 thru Mid August, 2009 - 45 day waiting period. Answered questions from vendors
Mid August, 2009 thru End January, 2010 - review of submitted documents & selection of vendor(s)
Early to Mid February, 2010 - final selection of a vendor
March, 2010 - April, 2010 - contract negotiations
Early May 2010 through early August 2010- Submission of 466-A, contract & Supporting Info, Certification of Vendor
Early September, 2010- Funding Commitment Letter issued
Mid September, 2010 through mid February, 2011 – PAETEC commences work on facility build outs
Late November, 2010 – first facilities begin to roll out live.
December, 2010 – Facilities continue to become live. As well as RFP #02 posted on USAC website
December, 2010 through January 2011 – F.A.Q on RFP 02, continue building out of facilities, commence invoicing
Late January 2011 – end February, 2011 – Selection of vendor for RFP 02
February thru April, 2011 – finalizing invoicing issues with vendor
April, 2011 thru May, 2011 –paperwork completion for FCL issuance on RFP 02
Early May, 2011 – additional RFP 03 (if monies allow) and FCL's of additional facilities

** Timeline provided is based on best case scenario and is subject to change based on any unforeseen circumstances*

Telemedicine Benefits ~ Our facilities have currently just gone live end of 2010 – Early, 2011. As the facilities continue to go live and the network continues to add partners this information will continue to increase. We are also in the process of bringing up other facilities onto our network. The majority of the facilities that were brought live via RFP 01 were the rural facilities. We are currently working on the FCL for RFP 02 and expect much better communication and access to various entities at that point in time.

A) Explain how the supported network has achieved the goals and objectives outlined in selected participant's Pilot Program Application:

B) Explain how supported network has brought the benefits of innovative telehealth and, in particular, telemedicine services to those areas of the country where the need for those benefits is most acute:.

C) Explain how the supported network has allowed patients access to critically needed medical specialists in a variety of practices without leaving their homes or communities:

D) Explain how the supported network has allowed health care providers access to government research institutions, and/or academic, public, or private health care institutions that are repositories of medical expertise and information:

E) Explain how the supported network has allowed health care professional to monitor critically ill patients at multiple locations around the clock, provide access to advanced applications in continuing education and research, and/or enhanced the health care community's ability to provide a rapid and coordinated response in the event of a nation crisis.

At this time we have just completed the posting of our RFP, and are currently working on the selection of our vendor(s) of our project.

Please note: *While we are developing the RFP for our network the Western New York AHEC and its Pilot Program Partners are working on the development and framework for evaluating clinical telemedicine and distant health care education applications. Discussions are currently underway between rural and urban partners in developing Pilot Projects for telemedicine and distance health education in preparation for the broadband access and services that will be provided through the FCC Pilot Project.*

We expect that as our network continues to expand and additional facilities are added on that the telemedicine benefits for all partners will continue to grow.

HHS Health IT Initiatives

Provide Detail on how the supported network has complied with HHS health IT initiatives:

- A) Explain how the supported network has used health IT systems and products that meet interoperability standards recognized by the HHS Secretary:*
- B) Explain how the supported network has used health IT products certified by the Certification Commission for Healthcare Information Technology:*
- C) Explain how the supported network has supported the Nationwide Health Information Network (NHIN) architecture by coordinating activities with organizations performing NHIN trial implementations:*
- D) Explain how the supported network has used resources available to HHS's Agency for Healthcare Research and Quality (AHRQ) National Resource Center for Health Information Technology:*
- E) Explain how the selected participant has educated themselves concerning the Pandemic and All Hazards Preparedness Act and coordinated with the HHS Assistant Secretary for Public Response as a resource for telehealth inventory and for the implementation of other preparedness and response initiatives:*
- F) Explain how the supported network has used resources available through HHS's Centers for Disease Control and Prevention (CDC) Public Health Information Network (PHIN) to facilitate interoperability with public health and emergency organizations:*

HHS & CDC

Explain how the selected participants coordinated in the use of their health care networks with the Department of Health and Human Services (HHS) and, in particular, with its Centers for Disease Control and Prevention (CDC) in instances of national, regional, or local public health emergencies (e.g., pandemics, bioterrorism). In such instances, where feasible, explain how selected participants provided access to their supported networks to HHS, including CDC, and other public health officials.

At this time we are still working on this information